

The After School Program is designed for children attending K-6th grade. Participants enjoy group activities that are conducted in a supervised structured manner. Our goal is to provide a safe & fun environment that will enrich your child's life. The After School Program is held in the gyms at the Lake Havasu Unified School District elementary schools.

Times are: Monday through Wednesday and Friday from 2:30 - 6:00 p.m. on regular scheduled school days and 1:00 - 5:30 p.m. every Thursday and other scheduled early release days. There will be time set aside each afternoon for snack. Snack is included in program price.

The After School Program offers homework time for all registered participants. Field trips will include: swimming at the Aquatic Center, kicking back to enjoy a movie at Movies Havasu, ELKS Soccer Shoot, ELKS Hoop Shoot and ELKS Dance/Pizza Party.

The After School Program also offers a youth adventure camp for 3rd-6th graders that provides instruction on Archery, Kayaking and Snorkeling as well as Fishing. No additional fees to participate in field trips and/or youth adventure camp.

There will be no After School Program on the following dates:

September 5th - Labor Day

October 10th - 14th - Fall Break

November 11th - Veteran's Day

November 23rd - 25th - Thanksgiving

December 26th - January 6th - Winter Break

January 16th - Martin Luther King Day

February 20th - President's Day

March 20th - 24th - Spring Break

The After School Program will offer an all day program from 7:30 a.m. to 5:30 p.m. on Friday, October 7th and Friday, December 23rd.

Participants will be responsible to provide their own lunch on these days.

Please contact us at 453-8686 with any additional questions and/or concerns.

FNGLISH

Below are the program session dates and fees that will be due this school year. We do not mail out payment reminders, so please keep this payment schedule for your records.

Program dates are as follows:

<u>August 8th - September 9th</u> (5 Weeks): \$137.50/1st child; \$87.49 each additional child in same family

<u>September 12th - October 7th</u> (4 Weeks): \$110/1st child; \$69.99 each additional child in same family

<u>October 10th - 14th</u> Fall Break (NO CAMP OFFERED)

October 17th - November 18th (5 Weeks): \$137.50/1st child; \$87.49 each additional child in same family

November 21st - December 23rd (4 Weeks + 2 days): \$131/1st child; \$91.00 each additional child in same family

December 26th - January 6th Winter Break Camp

<u>January 9th - February 10th</u> (5 Weeks): \$137.50/1st child; \$87.49each additional child in the same family

<u>February 13th - March 17th</u> (5 Weeks): \$137.50/1st child; \$87.49 each additional child in the same family

<u>March 20th - 24th Spring Break (NO CAMP OFFERED)</u>

March 27th - April 21st (4 Weeks): \$110/1st child; \$69.99 each additional child in the same family

April 24th - May 25th (5 Weeks): \$137.50/1st child; \$87.49 each additional child in the same family

In the event payment is not received in our office by 2:30 p.m. on the first day of the new session your child will not be able to attend. Our staff will be required to contact you to pick up your child. If no contact is made we will walk your child to the school's main office.

Financial assistance is available to those families who qualify.

Parent/legal guardian will need to fill out a scholarship application form as well as provide proof income (paycheck stub, disability, letter from an employer, unemployment or bank statement), and Food Stamp card & AHCCCS cards each session.

Lake Havasu City Recreation Division After School Program Registration Form

Participant Name		Ago	Gender			
(Last Name, First Name)	Date of Birth	Age	(M/F)	Grade	School	
Address: City:			State: Zip:			
Email Address:						
Parent/Guardian Name: Work Phone: Cell Phone:						
Parent/Guardian Name:	Work Pho	ne:		c	Cell Phone:	
Emergency Contact:	Emergency Contact: Relationship:				Phone:	
PG rated movies may be shown during this program. M	ay the Participant v	iew PG	rated mo	ovies? \	/es No	
Photographs may be taken for promotional purposes du brochures and media releases? Yes No		y the P	articipant	's photo	be published in	
Does the Participant have any medical conditions, behavioral issues, or allergies? Yes No If yes, fill out the Additional Health Information & Epi Pen Form.						
	Pick-up List					
Is the Participant permitted to walk home from the program? Yes No If yes, please indicate the time participant is permitted to leave the program: PM						
Participant WILL NOT be released to anyone whose name does not appear on this form below. Identification is required when picking up Participant. The following people are authorized to pick up the Participant from the program (please include the requested information for the parent/guardians and emergency contact even if listed above):						
It is the responsibility of the parent/guardian to pick up Participant on time at the end of the program if the Participant is not permitted to walk home. Participant will not be left alone due to late pick up; however you will be charged \$5 for every 15 minutes you are late. Lake Havasu City reserves the right to contact the Police Department if Participant is not picked up in a timely manner.						
Name: Rela	tionship:			Phone:	· 	
Name: Rela	Relationship:			Phone:		
Name: Rela	Relationship:		Phone:			
Name: Rela	ationship:		Phone:		:	
Name: Rela	tionship:			Phone:		

Emergency Medical Release

To the best of my knowledge, Participant is in good health and adequately immunized to participate in this program. In the event Participant is injured or should require medical attention, I authorize the securing of necessary medical treatment. I acknowledge that I will be responsible for all costs associated with any medical treatment. Confirmation of this authorization will be attempted if the circumstances permit prior treatment by calling the telephone numbers provided.

Hold Harmless Clause

To the fullest extent permitted by law, Participant and Participant's parent or guardian agree to indemnify, defend, save, and hold harmless Lake Havasu City, its departments, agencies, boards, commissions, officers, officials, agents, volunteers, and employees ("Indemnitee") for, from, and against any and all claims, actions, liabilities, damages, costs, losses, or expenses (including, but not limited to, court costs, attorneys' fees, and costs of claim processing, investigation and litigation) to which any Indemnitee may become subject, under any theory of liability ("Claims") to the extent that Claims are caused by the negligent acts, recklessness, or intentional misconduct of the Participant arising out of or as a result of participation in this program. Participant/Parent/Guardian agrees to be responsible for primary loss investigation, defense, and judgement costs where this indemnification is applicable.

Waiver

Participant and Participant's parent or guardian waive the right to any claim for damages or injury of any kind on behalf of Participant, accruing to Participant arising out of or as a result of participation in the program.

I declare that I am the Participant's parent or guardian. I acknowledge that I read this form completely and understand the responsibilities and privileges of participating in this program as well as the program policies and behavior rules. Participation in this program is voluntary. Lake Havasu City is not responsible for lost or stolen items. Lake Havasu City reserves the right to reconcile customer balances when participant has available account credit.

Parent/Legal Guardian:		Date:
	Signature	

Lake Havasu City Program Disciplinary Policy

While attending a Lake Havasu City program, all participants must comply with this Disciplinary Policy. Lake Havasu City reserves the right to refuse services to any participant.

I. General Rules

- A. Keep hands, feet, inappropriate comments, unkind words, and objects to yourself.
- B. Be respectful to other participants, leaders, aides, volunteers, and staff members.
- C. Listen and follow all the directions the first time they are given.
- D. Stay in assigned area and with your squad.
- E. Walk, for safety, unless in a supervised game or activity.
- F. Use respectful language at all times and use "inside voice."
- G. Check into program at schedule time and do not leave the program before scheduled time without proper advance notification from a parent or guardian, to a staff member.
- H. Report misconduct to a program staff member and do not retaliate.

II. Discipline Policy

- A. Inappropriate behavior and misconduct by participants will not be tolerated.
- B. There will be disciplinary consequences for the following types of misconduct:
- 1. Failure to follow program rules or instructions.
- General misconduct, including loud or boisterous behavior that tends to disturb other participants, and includes running when not permitted, minor defacement of property, and pushing or shoving others
- 3. A participant's persistent refusal to follow the instructions of program staff.
- 4. Use of obscene, vulgar, profane, disrespectful, demeaning, or threatening words or actions or gestures directed to or in the presence of any participant or program staff.
- 5. Mutual physical confrontations between students (fighting).
- 6. Possession or use of any tobacco or drug related items or 'look a like' items this may include cigarettes, chewing tobacco and other tobacco-related products, lighters, alcoholic substances, drug-consumption devices, and any substance suspected of being a 'drug.'
- 7. A behavior that may result in physical or mental abuse to oneself.
- 8. Committing an act of indecent exposure in the presence of any other participant or program staff.
- 9. Any other similar behavior or action.

III. Disciplinary Actions

- A. The following disciplinary actions may be taken when a participant engages in inappropriate behavior or misconduct. Discipline may not be progressive depending on the circumstances and is in the sole discretion of Lake Havasu City. Multiple disciplinary actions may be taken for a single offence.
- 1. Verbal reprimand
- 2. Removal from program activities
- 3. Loss of program privileges
- 4. Parent Contact

- 5. Parent Conference
- 6. Suspension from Program:
 - a. First Offense 1 program day suspension
 - b. Second Offense 3 program days suspension
 - c. Third Offense parent and staff conference to determine continued enrollment in the program
- 7. Permanent withdrawal of program privileges
- 8. Restitution
- 9. Immediate notification of authorities
- B. Participants that engage in inappropriate behavior or misconduct that endangers the safety of other participants or staff or harms property, may be immediately removed from the program without warning or notice
- C. When misconduct of a participant involves bullying or acts of violence as defined below, the following disciplinary actions will be taken:
- 1. Parent Contact, Immediate Suspension from Program, and notification of authorities, if applicable:
 - a. First Offense 10 program days suspension
 - b. Second Offense 6 month program suspension, including all programs offered by Lake Havasu City
- D. For the purposes of this document, the following words and phrases have the corresponding meanings:
- 1. Bullying is repeated acts over time that involves a real or perceived imbalance of power with the more powerful child or group attacking those who are less powerful. Bullying can be physical in form (e.g., pushing, hitting, kicking, spitting, stealing); verbal (e.g., making threats, taunting, teasing, name-calling); or psychological (e.g., social exclusion, spreading rumors, manipulating social relationships).
- 2. Acts of Violence include:
 - a. Assault A person commits assault by: 1. Intentionally, knowingly or recklessly causing any physical injury to another person; or 2. Intentionally placing another person in reasonable apprehension of imminent physical injury; or 3. Knowingly touching another person with the intent to injure, insult or provoke such person. (ARIZ. REV. STAT. § 13-1203)
 - b. Fighting Mutual participation in an incident involving physical violence, where there is no major injury.

I read and reviewed with the participant the Lake Havasu City Program Disciplinary Policy, and I agree to its contents.

Participant's Name:	·	 	·		
Parent/Guardian's Name:	•			· · · · · · · · · · · · · · · · · · ·	
Parent/Guardian's Signature:					· .
Date:		· .		-	
CA 1.04.15			4		

Lake Havasu City Recreation Field Trip Release

After School Program Swim Field Trip

Where: Lake Havasu City Aquatic Center

When: 8/25/16, 10/27/16, 1/12/17, 2/9/17, 3/16/17, 4/27/17, 5/11/17

Time: 2:30 p.m. - 5:00 p.m. (times are appoximate)

Participants will be transported via LHUSD buses or City Vans.							
Participant Name (Last Name, First Name)	Date of Birth	Age	Gender (M/F)	Grade	School		
Address: Cit	zy:		Stat	te:	Zip:		
Email Address:		·					
Parent/Guardian Name:							
Parent/Guardian Name:	Work Phor	ne:		Ce	Il Phone:		
Emergency Contact:	Relationsh	ip:		Ph	one:		
Photographs may be taken for promotional purposes during	g field trips. May	the Pa	rticipant's	s photo t	e published in		
brochures and media releases? Yes No							
Does the Participant have any medical conditions, behavior	al issues, or aller	gies? Y	/es	No .	If yes, fill out		
the Additional Health Information & Epi Pen Form.			·				
Participant has permission to participate in this field trip.							
EMERGENCY MEDICAL RELEASE To the best of my knowledge, Participant is in good health and adequately immunized to participate in this field trip. In the event Participant is injured or should require medical attention, I authorize the securing of necessary medical treatment. I acknowledge that I will be responsible for all costs associated with any medical treatment. Confirmation of this authorization will be attempted if the circumstances permit prior treatment by calling the telephone numbers provided.							
HOLD HARMLESS CLAUSE To the fullest extent permitted by law, Participant and Participant's parent or guardian agree to indemnify, defend, save, and hold harmless Lake Havasu City, its departments, agencies, boards, commissions, officers, officials, agents, volunteers, and employees ("Indemnitee") for, from, and against any and all claims, actions, liabilities, damages, costs, losses, or expenses (including, but not limited to, court costs, attorneys' fees, and costs of claim processing, investigation and litigation) to which any Indemnitee may become subject, under any theory of liability ("Claims") to the extent that Claims are caused by the negligent acts, recklessness, or intentional misconduct of the Participant arising out of or as a result of participation in this field trip. Participant/Parent/ Guardian agrees to be responsible for primary loss investigation, defense, and judgement costs where this indemnification is applicable.							
WAIVER Participant and Participant's parent or guardian waive the right to any claim for damages or injury of any kind on behalf of Participant, accruing to Participant arising out of or as a result of participation in the field trip.							
I declare that I am the Participant's parent or guardian. I acknowledge that I read this form completely and understand the responsibilities and privileges of participating in this field trip. Participation in this field trip is voluntary. Lake Havasu City is not responsible for lost or stolen items. Lake Havasu City reserves the right to reconcile customer balances when participant has available account credit.							
Parent/Guardian Signature	···			Dat	e;		

Lake Havasu City Recreation Field Trip Release

After School Program Movie Field Trip

Where: Movies Havasu

When: 9/8/16, 10/6/16, 11/10/16, 1/26/17, 2/23/17, 3/17/17, 4/13/17

Time: 2:45 p.m. - 5:00 p.m. (times are appoximate)

Participants will be	transported	i via LHUSI) bus	es or C	ity Van	S.
Participant Name (Last Name, First Name)		Date of Birth	Age	Gender (M/F)	Grade	School
Address: City: State: Zip:						
Email Address:					·····	
Parent/Guardian Name: Cell Phone: Cell Phone:						Phone:
Parent/Guardian Name:		Work Phone: Cell Phone:				
Emergency Contact:		Relationsh	ip:		Pho	one:
Photographs may be taken for promotional purposes during field trips. May the Participant's photo be published in brochures and media releases? Yes No						
Does the Participant have any medical conditions, behavioral issues, or allergies? Yes No If yes, fill out the Additional Health Information & Epi Pen Form.						
Participant has permission to participate in this five memory medical release. To the best of my knowledge, Participant is in good health as should require medical attention, I authorize the securing of with any medical treatment. Confirmation of this authorization bers provided. HOLD HARMLESS CLAUSE To the fullest extent permitted by law, Participant and Particicity, its departments, agencies, boards, commissions, officers claims, actions, liabilities, damages, costs, losses, or expense vestigation and litigation) to which any Indemnitee may becomegligent acts, recklessness, or intentional misconduct of the Guardian agrees to be responsible for primary loss investigation walver. WAIVER Participant and Participant's parent or guardian waive the right pant arising out of or as a result of participation in the field to I declare that I am the Participant's parent or guardian. I acparticipating in this field trip. Participation in this field trip is serves the right to reconcile customer balances when participaticipals.	ind adequately immore accessary medication will be attempt in a second with the attempt in a second with the any claim for any c	al treatment. I acted if the circumst guardian agree to s, volunteers, and not limited to, cour er any theory of lia g out of or as a re judgement costs r damages or injuderead this form course.	indemnitiemployeurt costs, ability ("Casult of pwhere the pwhere t	ge that I will prior to the set of the set o	I be respon reatment b save, and h nitee") for, fees, and co he extent t in this field ication is ap thalf of Part	isible for all costs associated y calling the telephone number of the telephon
Parent/Guardian Signature					Date	: